

STATE OF MAINE COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES AUGUSTA, SI

Mail: 135 State House Station
Office: 242 State Street
Augusta, Maine 04333
Tel: (207) 287-4179 Fax: (207) 287-6775
www.maine.gov/ethics

CAMPAIGN FINANCE REPORT OF INDEPENDENT EXPENDITURES 2004 GENERAL ELECTION

Name of Person/Committee Making Expenditure(s) Maine REPUBLICAN PORTY
Mailing Address 7 H166INS STIZEET
Mailing Address 9 H16GINS STREET City, Zip Code Avgusta, ME 04330 Telephone 622-6247
Instructions Please see previous page for reporting requirements. Complete notarized affidavit and two attached schedules.
Filing Schedule Independent expenditures for the 2004 general election in excess of \$250 per candidate must be reported to the Commission within 24 hours of making the expenditures. Independent expenditures aggregating in excess of \$100, but not in excess of \$250, must be reported to the Commission on October 12, 2004, October 27, 2004, or December 14, 2004 (whichever occurs first after the expenditure).
Please check: (X) Report of Independent Expenditure over \$250 () October 12, 2004 Report of Independent Expenditure of \$250 or Less Setober 27, 2004 Report of Independent Expenditure of \$250 or Less () December 14, 2004 Report of Independent Expenditure of \$250 or Less () Amendment to Earlier Report Dated: () Other (specify):
I CERTIFY THAT THE INFORMATION IN THIS REPORT IS TRUE, CORRECT AND COMPLETE. 10/29/04 10/29/04 10/29/04 Signature of PAC or Party Treasurer, or Other Person Making Expenditure(s)

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INDEPENDENT EXPENDITURES

AFFIDAVIT

STATE OF	MAINE SUPEREC	
COUNTY OFK	SUN BEECT	_
of the expenditures listed in	the attached report independe request or suggestion of, the	duly sworn, says that he/she made each ntly, and not in cooperation, consultation candidates named in the report or the
	Dwa	pe K. Brekel (Signature of Affiant)
Sworn to before me, this <u>2</u>	The day of Octo Ben	2004.
(Notary Public/Attorney at Law) 10/04/06	Valor	

CGEEP Form IE/AF (9/04)

Page____of__ (Schedule B-IE-1 only)

Schedule B-IE-1

ETHICS COMMISSION

CANDIDATE(S) SUPPORTED/OPPOSED

Please list all candidates that were the subject of independent expenditures. If more than one candidate was the subject of the expenditure, allocate the expenditure among the candidates.

Office sought by candidate (including district #)	Candidate's Name	Indicate whether expenditure was made in support of or in opposition to the candidate	Amount expended this reporting period for each candidate
State Sar #34	DEAN CLUKEY	SUPPORT	187.19
	140. 40E 1		

Page____ of ___ (Schedule B-IE-2 only)

Schedule B-IE-2

ITEMIZATION - INDEPENDENT EXPENDITURES

Please indicate the date, payee, purpose and amount of each expenditure. If you are reporting an agreement or obligation to make a future payment, please note that in the margin.

Date of expenditure	Payee, address, zip code	Purpose of expenditure	Amount
10/29	STRATEGIC ADVOCACY P.O.BOX 1124, SACO, ME	POSTAGE 2 PAPER ENVELOPOS	187.19
			:27 (0
1. Expenditures this page (Last page only Schedule B-IE-2)		187,19	
	2. Total from attached pages (Schedule B-IE-2)		
3. Total expenditures this period			187,19